

**TECHNICAL WORK MAY NOT BEGIN PRIOR TO CO APPROVAL**

NASA/GODDARD SPACE FLIGHT CENTER

**REQUEST FOR TASK PLAN / TASK ORDER**

CONTRACTOR	CONTRACT NO./TASK NO.	JOB ORDER NUMBER	APPROP. FY
QSS Group, Inc.	NASS- TASK NO. AMENDMENT 99124 16 2	429-288-11-02-89 00	

TASK TITLE: (NTE 80 characters; include Project name)  
**Advanced Technology Microwave Sounder (ATMS) Services**

APPROVALS: (Type or print name and sign)

ASSISTANT TECHNICAL REPRESENTATIVE (OR TASK MONITOR)	DATE	ORG CODE	MAIL CODE	PHONE
Ralph D. Welsh, Jr. <i>Ralph D. Welsh, Jr.</i>	10/4/99	429	429	301-286-9774

BRANCH HEAD	DATE	CODE	PHONE
Ray Taylor <i>Ray Taylor</i>	10/8/99	429	301-286-1271

CONTRACTING OFFICER'S TECHNICAL REPRESENTATIVE (COTR)	DATE	CODE	PHONE
Robert S. Lebair <i>Robert S. Lebair</i>	10/20/99	560	301-286-6588

FLIGHT HARDWARE, CRITICAL GSE OR SOFTWARE <small>(IF YES, NEED CODE 303 CONCURRENCE NEXT BLOCK)</small>	CONTRACTING OFFICER'S QUALITY REP.	DESIGNATED FAM:
<input checked="" type="checkbox"/> NO <input type="checkbox"/> YES	Larry Moore	

The contractor shall identify and explain the reason for any deviations, exceptions, or conditional assumptions taken with respect to this Task Order or to any of the technical requirements of the Task Order Statement of Work and related specifications. The contractor shall complete and submit the required Reqs and Certs.

(To be completed by Contracting Officer)  
**C.O. Requested Quote on:**  
 Date: **OCT 21 1999**

The contractor will develop specification or statement of work under this task for a future procurement.  NO  YES

Flight hardware will be shipped to GSFC for testing prior to final delivery.  NO  YES  N/A

Government Furnished Property/Facilities:  NO  YES - SEE LIST OF GFP (offsite only) / FACILITIES (onsite only)

Onsite Performance:  NO  YES If yes:  TOTAL  PARTIAL  
 If partial, indicate onsite work in SOW by asterisk (\*)

Surveillance Plan Attached:  NO  YES

Highlighted Contract Clauses: (to be completed by Contracting Officer)

Under Clause H.14, Task Ordering Procedure, subparagraph (f), the effective date of this task order shall be November 17, 1999.

**INCENTIVE FEE STRUCTURE (check one)**

(See Contract NAS5-99124, Attachment K, Incentive Fee Plan)

	<input checked="" type="checkbox"/> No. 1	<input type="checkbox"/> No. 2	<input type="checkbox"/> No. 3	<input type="checkbox"/> No. 4	<input type="checkbox"/> No. 5
Cost	10%	50%	25%	25%	%
Schedule	15%	25%	25%	50%	%
Technical	75%	25%	50%	25%	%

(To be completed by Contracting Officer)

Target cost of this task order is \$ 215,268

Target fee of this task order is \$ 13,992

Final target cost and target fee of this task order as contemplated by the Incentive Fee of this contract is \$ 229,260

Maximum fee is \$ 20,450

Minimum fee is \$0.

CONTRACTING OFFICER'S SIGNATURE:

(SIGNATURE IS ISSUED ACCORDING TO THE CONTRACT CLAUSE "TASK ASSIGNMENTS AND REPORTS")

*Lorrie L. Eakin*

11/17/99

NAME OF CONTRACTING OFFICER

DATE

**Lorrie L. Eakin**  
**Contracting Officer**

TYPED NAME OF CONTRACTING OFFICER

CONTRACTING OFFICER'S ACCEPTANCE:

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QSS Group, Inc.	NAS5- 99124	16 2	

Applicable paragraphs from contract Statement of Work: 2B

**STATEMENT OF WORK:** (Continue on blank paper if additional space is required)

Provide the documents required for the ATMS Implementation RFP package including the SOW, Specification, CDRL, and ICD. Documents should be assembled using inputs from the ATMS team, IPO office, and NPP s/c development team.

Review formulation contractors monthly reports, midterm reports, PDRs, and final reports and provide conclusions to the ATMS Instrument Systems Manager.

**PERFORMANCE SPECIFICATIONS:**

Monthly technical progress reports to include:

- Summary of monthly progress
- Plans for next month
- Problems
- Issues
- Resolution of Problems/Issues

**APPLICABLE DOCUMENTS:**

None.

**TASK END DATE:** 9/30/00

**MILESTONES/DELIVERABLES AND DATES:**

Written reports documenting the results of the above studies:

- Draft Implementation SOW, Specification, CDRL, ICD: ~~XX/XX/XX~~ 1/15/00
- Final Implementation SOW, Specification, CDRL, ICD: ~~XX/XX/XX~~ 3/15/00

**PERFORMANCE STANDARDS:**

- Schedule:** On-time delivery of the above
- Technical:** ATR's acceptance of the above

**FINAL DELIVERY DESTINATION (NAME, BLDG, ROOM):**